

## **APPROACH: Risk Prediction to support shared decision-making for managing heart disease**

### **LET'S CELEBRATE**

#### **The launch of the [My Heart Care and CKD decision aid](#) was recently featured in two University of Calgary articles:**

Between Spring 2020 and June 2022 our research team interviewed 41 patients/patient partners and 22 clinicians engaging them in the co-development of this personalized shared decision aid.

“This tool is meant to help patients with chronic kidney disease and their health-care providers make personalized choices,” says Dr. Matthew James

“The shared decision-making tool is designed to define the treatment options, provide individualized risk and benefit estimates, show how the different treatment choices impact those risks, and help identify a choice that best aligns with a patient’s values and preferences.”

“Having input from our patient partners throughout the research process was critical in the development of this shared decision-making aid. It’s important to provide the information that meets patient and health-care provider needs when facing these decisions.”

#### **Can-SOLVE 2.0**



The Can-SOLVE CKD Network Phase 2.0 grant proposal was successful and has received funding from the Canadian Institutes of Health Research (CIHR) for the next four years. Can-SOLVE CKD Phase 2.0 is designed to mobilize research-generated knowledge from the first phase of Can-SOLVE CKD into clinical practice. The APPROACH project phase 2.0 activities will involve implementing our decision aid into practice to improve health decisions for patients with CKD and heart disease. We will be reaching out to you to help guide our implementation strategies and resources and look forward to piloting the decision aid starting in 2023.



The tool provides personalized data for each patient.

“Dr. Wilson’s hard work was instrumental in the creation of this decision-making software tool,” says James. “His work has the potential to positively impact decision making for thousands of Canadians living with kidney and cardiovascular disease.” The statistical modelling was based on data from thousands of Albertans with CKD treated for heart disease in the APPROACH registry, along with results from randomized trials.

<https://news.ucalgary.ca/news/former-libin-trainee-embracing-new-career>

“We have very intentionally turned to patients to guide the work,” says James. “Patients have brought forward many insights along the way and the products are much more patient centred as a result. I am sure that engaging patients in the research process will continue to be incredibly helpful in the next phase of testing the tool.”

<https://news.ucalgary.ca/news/ucalgary-researchers-champion-patient-engagement-shared-decision-making-tool>

#### **Our Sponsor Spotlight**

Our team would like to thank our many sponsors for their ongoing support during the development process of the Patient Decision Aid.

**Thank you** to: CanSOLVE CKD Network, SPOR Strategy for Patient Orientated Research, Members of the Steering Committee, our valued Patient Partners, Volunteer Patients, and Clinicians.

